

Special Issue of APA Journal Focus Examines the Future of Emergency Psychiatry

Emergency psychiatry—the clinical application of psychiatry in emergency settings—is a dynamic field that has grown exponentially over the past five decades. The field, which is imperative to the successful treatment and care of even the most complex patients, has expanded beyond emergency departments (EDs) to reach a myriad of settings, not just locally, but around the world. To provide the best care to a challenging patient population, emergency psychiatrists must possess comprehensive knowledge of the legal, ethical, and clinical standards necessary for treating patients who present to emergency settings. *Focus: The Journal of Lifelong Learning in Psychiatry* has published an issue that examines the relationship between psychiatry and emergency settings and highlights new developments in the screening, evaluation, and treatment of patients in these settings.

Guest Editor Tony Thrasher, D.O., M.B.A., president of the American Association for Emergency Psychiatry, helmed this issue, collaborating with expert emergency psychiatrists to elucidate the less-explored facets of this field that are paramount to its success. One team of experts, led by Michael P. Wilson, M.D., authored an article that [discusses medical evaluation of the adult psychiatric patient in the ED](#) and offers an important alternative to the commonly used (and debatably unfit) term, “medical clearance.”

A theme throughout this issue is the assessment and management of patients experiencing crises in the ED. As highlighted in Layla Soliman, M.D., et al.’s article, with [70% of workers who experienced an intentional nonfatal occupational injury](#) being employed in the health care and social assistance industries, cognizance of potential aggression and violence and how to mitigate agitation are crucial to treating patients experiencing psychiatric crises. Ashley Curry, M.D., et al.’s article also focuses on agitation, emphasizing that [agitation is both a medical and psychiatric emergency](#), and describes proven management techniques, such as verbal de-escalation. Karon Jacob, Ph.D., and Jaya Gatchell, B.A., describe self-assessment and how patients can enhance this by using [biofeedback](#).

Emergency psychiatrists treat a variety of patients who present to emergency settings, with some patients experiencing extreme crises. Seth Powsner, M.D., and colleagues’ review delves into suicide, one of the leading causes of death worldwide, and discusses [suicide risk assessment, management, and mitigation in emergency settings](#).

David Pepper, M.D., in this issue’s Ask the Expert column, provides an interesting perspective on the relationship between [substance use disorders and EDs](#) and whether EDs are the appropriate setting for these patients.

The field of emergency psychiatry comes with carefully delimited legal boundaries, rules, and processes. John Rozel, M.D., M.S.L., Tara Toohey, M.D., and Priyanka Amin, M.D., describe the [critical legal principles relevant to emergency psychiatry](#).

Finally, in their review, Margaret Balfour, M.D., Ph.D., and Scott Zeller, M.D., go beyond the emergency department, providing an overview of the [crisis continuum and how the community can respond to behavioral health emergencies](#).

The full issue can be found here: <https://focus.psychiatryonline.org/toc/foc/21/1>

